Foster Family Home - Corrective Action Report

Provider ID:

1-160061

Home Name:

Juvy Perez, NA

Review ID:

1-160061-2

94-284 A Loaa St.

Reviewer:

Sue Lo

Waipahu

HI 96797

Begin Date:

7/6/2017

End Date:

8/8/2017

Foster Family Home

Required Certificate

[17-1454-6]

6.(d)(1)

Comply with all applicable requirements in this chapter; and

Comment:

6 (d)(1) Home visit made on 7/6/2017 for a 2-bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 8/6/2017

6 (d)(1) see applicable sections of this review.

Foster Family Home

Background Checks

[17-1454-7.1]

7.1.(a)(1)

Be subject to criminal history record checks in accordance with section 846-2.7, HRS;

7.1.(a)(2)

Be subject to adult protective service perpetrator checks if the individual has direct contact with a client; and

Comment:

7.1.(a)(1) Second sets of fingerprinting not present in the home for CG#2. Lapsed on eCrim due on/before 12/4/2016 - was done 1/1/2017 for CG#4.

7.1.(a)(2) Lapsed on Adult Protective Services/Child Abuse Neglect (APS/CAN) due on/before 12/11/2016 - was done 1/4/2017 for CG#4

Foster Family Home

Information Confidentiality

[17-1454-13.1]

13.1.(b)(5)

Provide training to all employees, and for homes, other adults in the home, on their confidentiality policies and procedures and client privacy rights.

Comment:

13.1.(b)(5) Confidentiality/Privacy Rights Training not present in the home for CG#2

Foster Family Home

Personnel and Staffing

[17-1454-41]

41.(b)(8)

Have documentation of current training in blood borne pathogen and infection control, cardiopulmonary resuscitation, and basic first aid.

Comment:

41.(b)(8) Lapsed on Blood Borne Pathogen (BBP) due on 3/20/2016 - was done on 3/35/2017 for CG#2.

Foster Family Home - Corrective Action Report

Foster Famil	y Home	Fire Safety	[17-1454-45]
45.(b)(2)	All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.		
Comment:	****		
45.(b)(2) Doo home for CG	umentation #2, CG#3, a	to train and implement appropriate emend CG#4.	ergency procedures in the event of a fire not present in the
Foster Family Home		Insurance Requirements	[17-1454-49]
49.(a)(1)	Genera	j;	
Comment:	× 0 × 0 0 0 0 0 0 0 0		
49.(a)(1) Liab	ility Insuran	ce not present in the home for CG#4.	

Compliance Manager

Primary Care Giver

7/6/2017 Date 01-06-17

Written Plan Of Correction

August 3, 2017

7.1(a) (1)

Second set of finger printing for CG# 2 was done last September 01, 2016 and copy was put on the home binder permanently.

CG3#4 will not lapse Ecrim. The home now has a special calendar to prevent expiring on the future and renew before due date.

7.1(a) (2)

Lapse on APS/CAN for CG#4 will not happen again in the future. The home is now using a special calendar date on I- phone to to keep track and alert on personnel requirements that are expiring before the due.

13.1.(b) (5)

CG#2 received Confidentiality/Privacy Rights Training on July 7, 2017, and documents copies were filled in the home binder. From now on, all new CG's will be trained on Confidentiality/Privacy Rights Training before rendering service.

41.(b) (8)

Lapsed on Blood Borne Pathogen for CG#2 will not happen again in the future. The home now uses special calendar on I-phone that keep tract on expiry date and renew before due date.

45.(b) (2)

Starting with CG#2 this month, CG#3 next month and etc, they will be all trained to conduct/implement emergency procedure in the event of fire and make sure that copies and document will be filled in the home binder.

49.(a) (1)

Liability insurance for CG#4 was obtain last July 11, 2017 and kept on the home binder. All CG's must have a liability insurance and must kept at the home binder.

SUVY C. PEREZ 08-03-17

94-284-A LOAASH.

Waipahn, Hawaii 96797